STATE OF CALIFORNIA TRAVEL EXPENSE CLAIM STD 262 (REV 6/93)

See Instructions and *Privacy Statement on Reverse Side

										Page	1	of	1	Pages	
CLAIMANT'S NAME					SSAN OR EMPLOYEE NUMBER*					DEPARTMENT					
Phyllis W. Cheng										DFEH					
POSITION CB/ID NUMBER					DIVISION OR BUREAU								INDEX NUI	MBER	
Director Exempt				Executive											
RESIDENCE ADDRESS*				HEADQUARTERS ADDRESS								TELEPHON	NE NUMBER		
					2218	Kausen	Drive.	Suite 10	0				916-478	3-7250	
CITY STATE ZIP CODE				CITY STATE							ZIP CODE				
					Elk Gr	ove		CA				95758			
(1)MONTI	H/YEAR	(3)	(4)	(5)	MEALS		(6)		RANSF	PORTATIO	N		(8)	(9)	
Mar-Ap	r 2000	LOCATION				0.7.1.7	1	(A)	(B)	(C)	(D)				
(2)	1 2009	LOCATION WHERE EXPENSES	LODOINO	DDEAK		0.T., L/T	INIOIDEN	0007.05	TVDE	CARFARE		CARLICE	BUS NESS	TOTAL	
(-)	1	WERE INCURRED	LODGING	BREAK- FAST	LUNCH	N/C RELO OR	TALS	COST OF TRANS	TYPE USED		PRIVATE	CAR USE	EXPENSE	EXPENSES FOR DAY	
DATE	TIME					DINNER					MILES	AMOUNT			
03/12	1705	Sacramento/Burbank							Α						
03/13		Los Angeles							РС		31	16.87		16.87	
03/16	1115	Burbank/Sacramento							Α						
03/18	1705	Sacramento/Burbank			1				Α						
03/19	1703	Anaheim							PC	8.00	58	32.14		40.14	
									1		00	32.14		40.14	
03/20		Los Angeles			1	-			В	2.50				2.50	
03/22	1450	Burbank/Sacramento							Α						
03/23		Sacramento/Fresno/Sa	cramen	to					SC						
03/24		Sacramento							SC	8.75				8.75	
03/25		Sacramento/Belmont							SC						
_															
03/25	1855	Oakland/Burbank							Α						
03/26		Los Angeles							РС						
03/27		Los Angele/Riverside							РС		106	58.43		58.43	
03/30		Los Angeles							В	5.00				5.00	
03/31		Los Angeles							В	2.50				2.50	
04/01	0035	Burbank/Sacramento			1				A	2.50				2.50	
(10)		OTALS								26.75	105	107.44		134.19	
` '		DE (ACCTG USE ONL	 	l	<u>I</u>	<u>I</u>	<u> </u>	<u>I</u>	l	20.75	193	107.44	<u> </u>	134.19	
COLO		TOTAL	1)											124.40	
(11) DI II			TAILS (of	took roo	ointo/vou	ohoro who	on roqui	rod)			(12) N/	JDMAL M	\$ (OBK HOL	134.19	
										2) NORMAL WORK HOURS					
	_	by the employee at her priv								-		00-1700		OFNOE NED	
											VEHICLE LICENSE NBR.				
		speaker at the 20th Annual								-			State Car		
3/20/09: Met with Gary Blasi, UCLA-RAND Center for Law & Public Policy re: FEHA 50th Study,L.A. (14) MILEAGE R											MED				
3/23/09: Keynote speaker, CCERT, Fresno55															
		SCSA Undersecretary Reid;							-	-	AGEN	CY ACCO	UNTING C	FFICE	
3/25/09: Keynote speaker, Notre Dame de Nauru University re: FEHA 50th Anniversary, Belmont.															
									ISE ONL	.Υ					
3/27/09: Guest appearance: CNN Headline News/Riverside Edition re: FEHA 50th, Riverside.															
3/30/09: DFEH L.A. District Office; CELA Liaison meeting, Pasadena.															
3/31/09: Keynote speaker, LACBA Labor & Employ. Section Annual Symposium, L.A.										PAID BY REVOLVING FUND CHECK NBR.					
(15) I HEREBY CERTIFY That the above is a true statement of the travel expenses incurred by me in accordance with DPA rules in the service of the State of California. If a privately owned vehicle was used, and if mileage rates															
exceed the minimum rate, I certify that the cost of operating the vehicle was equal to or greater than the rate claimed,															
and that	I have m	net the requirements as preso		•			•								
vehicle s	afety an	d seat belt usage.													
CLAIMA	NT'S SIG	GNATURE	DATE		(16) SIGI	NATURE C	F OFFIC	ER APPRO\	/ING T	RAVEL AN	D PAYM	ENT	DATE		
	_ 0//	-													
			4/1/200	9										4/1/2009	

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STD 262 (REV 6/93)					

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(17.)SPECIAL EXPENSE AUTHORIZATION-SIGNATURE and TITLE (See Item 17 on reverse)	DATE

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